

## **Application Data Sheet**

### **Application Information**

|                                  |  |
|----------------------------------|--|
| Application Type::               | Regular  |
| Subject Matter::                 | Utility  |
| Suggested Group Art Unit::       | Not Yet Assigned   |
| CD-ROM or CD-R?::                | None   |
| Sequence submission?::           | None   |
| Computer Readable Form (CRF)?::  | No   |
| Title::                          | METHOD AND APPARATUS TO REDUCE<br>SECOND ORDER DISTORTION IN<br>OPTICAL COMMUNICATIONS |
| Attorney Docket Number::         | 490102001400   |
| Request for Early Publication?:: | No   |
| Request for Non-Publication?::   | No   |
| Total Drawing Sheets::           | 3  |
| Small Entity?::                  | No   |
| Petition included?::             | No   |
| Secrecy Order in Parent Appl.?:: | No   |

### **Applicant Information**

|                                  |               |
|----------------------------------|---------------|
| Applicant Authority Type::       | Inventor      |
| Primary Citizenship Country::    | France        |
| Status::                         | Full Capacity |
| Given Name::                     | Frederic      |
| Middle Name:                     | M.A.          |
| Family Name::                    | COPPINGER     |
| City of Residence::              | San Jose      |
| State or Province of Residence:: | CA            |
| Country of Residence::           | US            |

Street of mailing address:: 2668 Briarwood Drive  
City of mailing address:: San Jose  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95125

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Taiwan  
Status:: Full Capacity  
Given Name:: LiPing  
Family Name:: CHEN  
City of Residence:: San Jose

State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 935 Longwood Lane  
City of mailing address:: San Jose  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 95129

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Family Name:: PIEHLER  
City of Residence:: Half Moon Bay  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 127 Lewis Avenue  
City of mailing address:: Half Moon Bay  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94019

**Correspondence Information**

Correspondence Customer Number:: 25226

**Representative Information**

Representative Customer Number:: 25226